687 567 476 failed to account for, State grain or money, etc., in their charge. Such a debtor was, and is still, termed a "bákidár" or "defaulter." Such persons, and their descendants, were, till the year 1890, [148] obliged to work for the State in return for their daily ration only, the rest of their earnings being confiscated by the State, as part payment of the original default.

164 757 SMALL-POX--dumpa or drumpa. Small-pox is rare in Ladak, but in the summer of 1834 it broke out with great virulence, and is said to have carried off about 14,000 persons, or one-twelfth of the entire population. The Tibetan custom in regard to this disease is to take the patient away to some secluded spot, to give him a few days' supply of food and drink, and then to leave him to take his chance of recovering.

601 [149] SON--pootsa.

774 SOUL--sem (soul); SHok or srok or tshey (life); hning or sning (heart). In the Roman Catholic Tibetan catechism the word "soul" is translated "namSHes" which in Ladák is understood to mean the "ghost" of a dead person. But see "Spirit."

241 SOW TO--sáwan (or sáon) tap ches (to follow the plough and throw seed into the newly-made furrow); sáwan giástor táng ches (to scatter seed and then plough it in). The latter is the procedure followed by the very poorest agriculturalists in Ladák.

[150]

774 776 SPIRIT--sem (the soul); SHok or srok or tshey (the life); hning or sning (the heart); tun (energy); namSHes or namSHet (a ghost); thukngyid (the Holy Ghost); sem or thuks (as the spirit of an action or speech, etc); hla or hloo (a god or fairy); hlámo (a goddess); hlandey or hlandrey or dey or drey (a demon or evil spirit or phantom); ghegs and rdon and hnotchet (evil spirits); gongpo (the spirit with which a man may be "possessed"); árak (an alchoholic drink); chut (the alchoholic essence).

787 273

516 [151] SQUAT TO--duk ches (general); tsong-tsong-la duk ches (as a Hindustani sits on the upright calves of his legs); pugdong (or pigrdong) tsukstey duk ches (as Central Asians sit, in a kneeling position, but sitting back on the up-turned heels); trupzheel-dakstey (or tubzhildakstey) duk ches (cross-legged like a tailor).

751 The
[326] goldsmith in Leh, who also produced many temple implements aside from the women's ornaments that he made, had sold him the silver one for two rupees; the consecration by the lama, who inserted a magical piece of paper by which the amulet obtained its magical power, cost another 12 anna (equals Reichsmark 1.00).

753 Despite all these protective measures, in spite of all pious
783 exercises and arts of exorcism performed by the priests, little Drogpa Namgyal became seriously sick when he was about two years old, around the time of the ripening of the apricots. He suffered from a
[757] very bad stomach and intestinal disease which could not be alleviated by any of the remedies applied to it, such as the eating of flour porridge, medicines, and the like. How was this possible after all the protective measures which had been taken up? There must be some special reason for this. /28/ Grandmother Tsering Putrid turned to investigating. She wanted by all means to find out what it was. After two days she came back filled with anger from the neighbor women with whom she had had a long, excited conversation. Now she had discovered the cause. The niece Yangdsom, who often had to take care of the little boy and who then carried him around tied to her back by a wide shawl, had gone out of curiosity into the house of Dragtschanpa. The latter's wife had recently died, and the niece had gone into see what the lamas, who had gone in with books, censers and musical instruments, were doing there. In so doing she had, of course, become impure, together with the unsuspecting child on her back, and the house god was angered about this. The stupid girl! For this stupidity she should have her ears boxed a couple of times once she had been purified again by an offering. And what was to happen to the sick darling? The lama
755 Mipam who was much in demand as a healer, was called into the
783 house. The lama sat down by the side of the mother who had the child in her lap and was crouching on a carpet; he took a book and began to read prayers to the medicine Buddha Manla (Tibetan: sMan-bla, in Sanskrit: Bhaishajyaguru), the great healer of all sicknesses. Then he produced a small brass mirror which had a loop at its edge through which was tied a strip of white silk. This mirror the lama held before the child's face in such manner that its reflection was visible in the mirror. Then he sprinkled consecrated water from a small metal jug several times over the image in the mirror at the same time constantly mumbling prayers and formulas to himself. By this process, as the holy man explained, the child was purified of all stains.

Then the lama took a slip of paper on which he had written a

000 previous magistrate had enriched himself considerably by accepting bribes and through fraud in the collection of the taxes (as so many of the higher and lower officials did in the country). This had finally landed him in jail.

777 Among his compatriots Namgyal was considered a lucky person. "No wonder," they would say, "after all, he was born under a lucky star. His Sparka, Mewa, and Lungta signs (astrological signs) are high; even the worst demons cannot harm him." They liked to apply [538] an old proverb to him: The lucky person (who was born under favorable stars) you may chase, you won't catch him; the unlucky person may flee, he will not get away (159).

159. The proverb reads in Tibetan: ños-ʻgrug-la aded-de mi non / rkyen-ñan-la śor-te mi bud.

000 Thus it looked as though the ninth year of Namgyal's married life, the earth-tiger year, was also to be a fortunate year. The old devil-tamer (Dorje Dud-joms) was still practising his black art and without Namgyal's consulting him, since by now he refused the soothsayer's services completely, the latter had said that the new year would be a year of good fortune for him and his house, judging by all the signs. Namgyal's wife had secretly asked the old Gya-mt'so-pa, the fairytale teller. The latter had consulted destiny in his own manner. Nothing pointed to approaching disaster, he said. The Dragshos people could rest easy.

With a contented mind Namgyal had set about his spring tasks. Then suddenly dark clouds gathered over his house.

755 His boy, Trashi Rigdsin, who had developed into a strong, straight lad with joy in living and doing, became ill of a violent intestinal disease during the summer at the time of the ripening of the apricots. In a short time he pined away to a mere skeleton. All medicines of the lharje (magical doctor), blood-letting, burning with /180/ red-hot iron, the mirror cure, the "baptism" with the drinking 000 of the magical water (160), none of it was of any avail. The lamas

•757 177 160. Tibetan medicine is laid down in a series of volumes (in block-printing) in the great collective work of the Buddhistic canon (bka-ʻgyur, pronounced Kangyur). The main work of these is the Gyud-ji (rgyud-bźi). Tibetan medical knowledge is based in part on Indian, in part on

Chinese anatomy and medical science; nor are ancient Babylonians, Greek, and Persian influences absolutely excluded. The school of medicine on the Eisen /"Iron"/ Mountain (lcags-po-ri), a part of Potala Mountain, on which the palaces of the Dalai Lama is also situated, constitutes a part of the university for the lamas, at which they are prepared for their service. Here is likewise the medical faculty of the university.

Anatomy, as a science, is on a very low level among the Tibetans, since Tibetan physicians do not perform any dissection of corpses. Thus they know the inner parts of the human body at best through comparison with those of the animal body which they get to see--illicitly--at the killing of an animal, which is a sin for the Buddhist. (Compare Dr. Reinh. Müller, "Ein Beitrag zur ärztlichen Graphik aus Zentralasien," in the Archiv der Geschichte der Medizin, Volume 15) The Tibetans have taken over their scientific anatomy from the Chinese, with all the errors and defects that were contained in it. Thus on old anatomical tables, for instance, the liver is drawn in on the lefthand side, and the spleen on the right. (Compare Reinh. Müller, "Über Skeletdarstellungen," in Asia Major, Volume 2.) The anatomical tables (Tibetan, p'yaṅ-k'og las-t'ig) copied from the Chinese, show, correspondingly, quite phantastic representations of the human body; they serve primarily to indicate the spots on the body that are suited to bleeding and burning (with red-hot iron). Both procedures are frequently applied to human beings as well as household animals by Tibetan doctors. Often they produce successful results. But quite often they use burning in quite a nonsensical manner, on sensitive parts of the body, such as, for instance, the eyelid, the burning of which causes very severe harm.

Tibetan pharmacy uses a great number of native plants, and often in a very effective way, in the form of decoctions, powders, and pills. Aside from this they use metals as curative agents, such as gold, silver, copper, iron, brass, zinc, and mercury (the latter for syphilis); furthermore stones, minerals, and soils, such as, for instance, turquoises, pearls, snail shells, corals, cooking salt, natron, saltpeter, and sulphur.

The parts of animals' bodies play an important part in

278 Tibetan medicine, as they did earlier among all Aryan peoples. The gall of an ox is supposed to be good for eye diseases, the spleen for infections, the kidney for kidney ailments; blood, when drunk fresh, "draws the poison out of the blood," the tongue of a dog cures infections, pulverized dragon's teeth (probably crocodile's teeth) alleviate tooth aches. By means
752 of magnets the physician is supposed to draw arrow heads out of the wound.

Tibetan doctors are skillful in putting splints to simple bone fractures. In the case of broken ribs they very sensibly tie a wide strip of cloth around the chest and then cover it with loam, which forms a stiff dressing when the loam cools off. The European doctor achieves the same result by means of an adhesive dressing or a plaster cast. Thousands find a
743 cure for their ailments in the spas scattered throughout Tibet, as for instance, in Sabu (Ladakh), in Panamig (Nubra), and
• 757 in many other places. Massaging is practised by the Indians as well as by the Tibetans with considerable skill. Matters are terrible as far as the pulling of teeth is concerned. Since they do not have regular dentist's forceps, the person plagued by a toothache goes to the smith, because he is usually the only one who has a pair of pliers. Two men hold the patient who lies on his back on the ground. The smith kneels over him and with his blunt pliers he grips the diseased tooth and pulls at it. Something finally gives way: Sometimes the diseased tooth comes out, sometimes the jaw breaks, and it also happens that the pliers break and the tooth remains in the jaw.

000 We may wonder about, and laugh at, some of the curious remedies of Tibetan medicine. But we must remember that into the 18th, yes, even as recently as the 19th century, no less peculiar remedies were produced, praised, and eagerly bought in European pharmacies, including those in Germany, than we encounter in Tibetan pharmacy. Things like stork's fat, bear's fat, wolf's and fox's fat, worms, crabs' eyes and snake skin were since time immemorial considered highly effective cures. Quite especially coveted were remedies which were produced from parts of the human body, such as burned and pulverized human skull, blood, gall, and fat of human beings, and they were considered particularly effective if the

000 train. There was one other exception, when we traveled from Pagmur to Leh with Nehru's horsemen.

133 About eight miles below Pagmur at a place called Zara we got
361 horses and yaks. Zara is a barren, rolling basin that lies at the confluence of three bleak valleys. There is no mark of habitation at Zara except a few tents. Zara is indeed only a rendezvous for the goatherds of Rupshu—a region as remote from civilization and even from caravans as any place in Central Asia, an area inhabited by migrating tribes who have and enforce their own law quite independently of the central government at Leh.

136 Rupshu has large, fat marmots (called wild dogs by the natives), who peer curiously at all travelers. They pop in and out of their holes, running awkwardly. Then they stand and whistle in
[825] a tantalizing manner. The natives believe the marmot has the soul
• [751] of a man who is mischievous and malicious. The fat[1] is used externally for rheumatism.

Rupshu also has some geese and ducks, the burrhl or blue sheep, the big-horned *Ovis ammon*, a snow cock, and gazelles. Big brown wolves raid the flocks of the miserably poor people, called Rupshupa or Changpa, who roam its almost barren basins and ridges.

137 This area has bunch grass, the mossy *burtse*, the low *dama* bush, and a small sage-colored bush that the Tibetans call *jyapshen*. But one takes a long step between clumps of grass. The mark of
735 overgrazing lies heavily on Rupshu. The mark of poverty is on
511 the people and their possessions, as well as on the land. Their
[291] brown pup-like tents are often in tatters. The Rupshupa go barefoot, wrapped in heavy brown coats that reach to their ankles. The black hair of men and women alike hangs in a tangled mass down their foreheads and necks. Their skin has ground in it the dust of hundreds of storms, and they carry the look of people who have not bathed for months on end.

000 We met the Rupshupa at Zara on a small piece of green meadow by a clear-water brook that comes down from the east.

[1] Of the marmot--Analyst]

Horses, Mules, Yaks, and Moti

They were friendly and hospitable, and curious over my camera 000
equipment. They were curious over me too—the first American
ever through Rupshu. These people[1] are not farmers; they are 233
pastoral people who live on their herds of sheep, goats, and yaks.
They run the small Purik sheep that have a fine wool and that
lamb twice a year. They are primarily meat-eaters; and they stood
grinning at me, showing front teeth missing.

They had good fast horses which we took to Leh. We wanted 492
to reach Gya that night, thirty-two miles from Pagmur and
twenty-four miles from Zara. The mules could not stand this
grueling trip in one day, for we had Staglang La Pass, nearly
eighteen thousand feet high, to cross. So we unpacked the mules,
put their baggage on eight yaks, took saddle ponies for ourselves,
and headed for Gya. We paid well for the service—three rupees [465]
eight annas per stage per animal, or $1.40 per animal from Zara
to Gya, plus one rupee (twenty cents) for each of the six herders
of the yaks.

The yak is an ox, low and powerful. It has large, sweeping horns 231
and long fur, usually black. There are some wild yaks in Ladakh 492
and Tibet. But most are domesticated. Their milk and butter are
widely used. The butter is indeed indispensable for *gur gur cha*; [757]
and when rancid, it is considered not only especially good for
gur gur cha but for the massaging of aching muscles as well. The
dung is used for fuel; and it burns with a hot, light blue flame and
no crackling. The yak's tail is sold commercially as a whisk to
keep off flies or as a beard for Santa Claus.

The yak is *Bos grunniens*, and, true to the name, it does groan
as it walks. The natives have no halter or bridle on a yak, only
a ring through its nose, which always seems to be bleeding. Yaks
can carry huge weights—250 or 350 pounds. A yak thrives on high
altitudes; the higher the better, it seems. It can go practically
anywhere in the high Himalayas, as high as man can go. It does
not have man's great adaptability, for it would perish at even the
relatively high altitude of Manali, 6,400 feet. It is at its best from

[1] [The Rupshupa -- Analyst]

12: Douglas T-3 (1951)1953 AJ4 W. Tibetans AJ4

mycin, and even the newest of the antibiotics, terramycin. And en route through Europe I put in a supply of Entero Vioform.

My emphasis was wrong in two respects. In the first place, I discovered that diarrhea and dysentery did not necessarily carry the grave threat I had imagined. In the previous two summers I had been ill at least once a week as I journeyed through the Middle East and Asia. I maintained that average no matter how much care I took. But I learned a valuable lesson in Karachi from Mrs. Avra Warren, the wife of our Ambassador to Pakistan. It seems that the native remedy for diarrhea and dysentery is the psyllium seed. Mrs. Warren learned that the psyllium seed is also an excellent preventive. Take a small handful once a day for thirty days; then take that dosage once a week. Americans have learned that one who follows that routine seldom if ever has the intestinal disturbances that plague Asia. I learned by happenstance that one Entero Vioform tablet with each meal serves the same purpose. I followed that routine on my Himalayan trek, and I was never ill from stomach or intestinal troubles.

In the second place, I learned at Manali from Dr. H. W. Williams of the Lady Willingdon Hospital that my medical kit should have been designed not only for me and my staff's needs but for the needs of the natives as well. A foreigner who goes to these remote regions enters territory where doctors have never been. There are no medicines, no first-aid stations, no hospitals. A man coming from the outside world is expected to have medical remedies. The natives flock in at every camp for treatment.

But I learned this too late for me to enlarge my medical kit to any extent. I did, however, get several hundred aspirin from Dr. Williams as we left Manali. And that day was not gone before I started dispensing them.

The storm that caught us before we reached Koti the first day of the trek was a cold, devastating one. All of us, including the porters, were soaked through and chilled to the marrow. That evening at Koti six of them lined up in front of me.

12: Douglas T-3 (1951)1953 AJ4 W. Tibetans AJ4

"My back aches, Sahib," the first one said, indicating the muscles along his spine. Prescription: two aspirin now, two at bedtime.

"My legs ache, Sahib," said the second, rubbing the muscles of his thighs. Prescription: two aspirin now, two at bedtime.

"My head aches, Sahib," said the third, touching his temples. He had no fever. Prescription: one aspirin now, one at bedtime.

The next two had simple headaches but no fever. Prescription: the same.

The sixth one puzzled me. He had a severe headache around his eyes and his temples. I had no fever thermometer, but I knew from his forehead that his temperature was well above one hundred. He had a nasty cough that sounded dry and rasping. The man was sick, and I was stumped. I decided to roll him up by the fire, give him two aspirin, and then see him again in an hour.

His son, aged ten, had followed him from the village of Koti, apparently apprised of the father's illness. As the man lay before the fire, the son sat at his head and massaged his temples. In an hour I asked the patient how he felt; but before he could reply the son spoke up.

"This is a cruel world. You are rich, we are poor. We have to work hard for our living. Father gets up at dawn and works until dark. So does Mother. We all work hard. It is not fair. It is not fair that you are so rich and we are so poor."

Turning to Rahul, I asked, "What is the meaning of this?"

"Communist propaganda," he replied. "In this part of the world the Communists try to plant simple and troublesome questions in the minds of the young."

"Ask again about my patient."

Once more the son responded, complaining of the gulf between the rich and the poor.

"I don't care right now about your political philosophy," I replied. "How's your father?"

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

were engaged, becoming so violent that our tents partly blew down we were partly helped to descend, for its inhospitality drove us on into Kargil. The camping ground is a very pleasant one near some mills by a stream. On through a gradually narrowing gorge to Lotsun, where half of the whole march is done, then through Darkit, where the "headman" of the wee village is a woman, and then at last the defile opens out, and the mountains round the valley of Mulbek come into view.

As we emerge we see our first *chortens* on the hill on our right, and a little further on we notice that another broad valley enters the Mulbek one at an obtuse angle, while whole ranges of mountains come into view, vast upheavals at all sorts of angles. Still a little further till we have to turn our heads well round on the right, then at last we spy, built into the side of the rock behind and facing that other valley, Shergol, our first lamasary, the queerest, most elfish of structures, only distinguishable by its whitewash from the rocky formation into which it seems to merge. Now indeed we are back into Lamaland. Even before this, while watching for our first *dGoupa* (monastery), again a perfect little picture has claimed our attention on the left. A dear old grandmother, with her white uncovered locks blowing round her cheery wrinkled old face, is standing near a mossy-looking rock from which spring-water is falling, with her picturesque country basket, a four-sided structure converging to a cone-like point, at her side. This is a medicinal spring, famed for its tonic effect on the stomach, but on inquiry, the old lady says she has been applying the water to her arms and shoulders for which it is also remedial. Evidently she suffers from rheumatism in her old age.

The next part of the road has already been referred to in our third chapter with its ludicrous resemblances to scenes and statues, all the more fantastic for the stately majesty of the great hills behind. Had the long march so wearied us that we were getting dreamy, or was that really an old judge in

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. ..ibetans AJ4

The Doctor Memsahib once had 757

the privilege of coming upon a family unawares just at dawn in the middle of winter. She had been called out to a case in a village, nine miles from Leh, the last two miles of which had to be done in the dark, that is by snow and starlight, and she and her Ladaki nurse were glad to walk over the frozen snow a little to keep their feet from freezing. Already icicles stretched from upper to lower eye-lashes, and whiskers, formed by the frozen moisture of their breath, adorned their mouths. The patient's friends had sent for the Doctor three days too late ; already two small lives were extinct, and the last dim hope of the mother lay in a surgical interference. An operation was performed, after sterilizing instruments in a cooking pot by the light of a fire of sticks on the mud floor, the nurse giving chloroform for the first time. But it was too late and, at about two a.m., the patient died. We sat on till the first dim light appeared, for out-of-doors we feared wolves in the dark, and a strange experience it was. On one side of the 593 764
room the corpse covered with sacking and filthy sheepskin, near the fire on the floor quietly sobbing, was the unkempt, shaggy, ragged husband, who, for all his uncouth appearance, had exhibited the most extraordinary tenderness and patience with his suffering wife ; near the stove his mother-in-law, a wrinkled old hag, who wailed intermittently. On the further side of the stove hens nestled. In the next cold fireless room two children were sleeping, and we were told that downstairs a blind old grandfather had been put in the straw cellar (again the " wrong way round " compared with our hayloft in the West) to keep warm in the horses' fodder. The Ladaki nurse spread her coat, lined with sheepskin in the corner by the stove for her Doctor, and fetched a thick horse-cover for herself. The fire of manure in the stove had gone out, and the two mourners occasionally added sticks to the one on the floor, but the room was bone cold. The family were so poor 511
that they had not offered us even a warm drink during the long, 574
bitter night, though, when they thought we were drowsing,

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

By the time she is grown up, a girl should thus have quite a good sized *perag*,[1] which functions as her dowry, in fact she regards it as her bank, for she invests money in turquoises as a provision for widowhood or old age. The mother's *perag* usually goes to the eldest daughter at her marriage, after which the mother must be content with a small one. As the eldest son inherits all land property, so the eldest daughter inherits all ornaments. Unfortunately the number and size of the turquoises on a head-dress are a source of great jealousy, and a lady with a very resplendent *perag* is often one of suspicious morals. In olden times the ladies of high rank in Ladak all wore ear-flaps of sable, brought from beyond Yarkand, but now these are seen only on the Queen and the old Queen Mother. Another custom traceable to a royal indisposition is that of wearing a large gold and silver ornament in front of the neck at weddings. This originated from the desire of a Queen on such an occasion to hide a goitre which disfigured her neck.

The women also have many other ornaments. Ear-rings of seed-pearls, threaded on a large wire hoop, which passes round the whole ear, with one or two turquoises and corals at the bottom of the circle. Necklaces composed of little chased gold amulet boxes, interspersed with coral and turquoise, or other less elaborate ones, made with red beads and little silver ornaments. Silver chatelaines worn on the breast, with picks for nose, ears, teeth and other purposes, and large round brass ornaments at the waist from which leather threads pass to a brass needle-case, to the other side of which are attached a number of chains of cowries, also threaded on leather. Finally bracelet-cuffs, made of chased silver or white shell, used to knock together in salutation but also convenient for keeping back the long sleeves.

Here is another custom the reverse of ours, for whereas European women wear short sleeves, in summer at any rate (the Ladakis probably think this must be to economize stuff), both men and women in this country have them cut very

[1] C.f. turquoise studded headdress. - ANALYST]

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

CHAPTER XIII

Professions & Industries

WE have now to watch our Ladaki friends as they earn their livelihood, for not all are owners of fields, and even those who are find that an extra vocation allows of a dish of meat, rice and other luxuries on special occasions. Let us begin with the professional gentlemen. The clergy will be treated with elsewhere, but in addition there are doctor, horologist, teacher and nun to consider, all of whom, though not real priests, are regarded as performing religious functions. There are quite a number of doctors, some of them doing useful work, although the treatment, by even the best of them, occasionally shows shocking results. Their method of training is much like that which obtained formerly in England, when he who aspired to medical knowledge became apprenticed to a practising physician, and thus by actual experience learnt his trade. The theoretical knowledge is found in four large volumes, belonging to the *Kahgyur* which are the one hundred and eight large books containing the wisdom and knowledge of Lamaism. The doctor or *amchi* dons no distinctive dress, but he can always be recognized, for slung over his back he carries his medicines tied in a long cloth. These he has carefully collected on the hills during the spring and summer months, his knowledge of herbs being doubtless considerable, and to his stock he adds by purchases in the bazar from down-country merchants. See him as he climbs up the rickety staircase right on to the roof to visit one of his patients who

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

lies huddled up in a corner, complaining of bad pains in his knees, one of the ills to which most Ladak is advanced in age seem to be heir. The bad knees are felt, the tongue looked at, and then the serious business of examining the pulses—in the plural—is undertaken. Although they are all found at the wrist where the Western physician looks for the single one, yet there are actually six pulses, three on each hand, so that not only may the pulse of the heart be examined, but also those of the stomach, lung, liver, kidney and spleen. This thorough examination finished, the doctor proceeds to treatment, which in this case is the cautery, a great stand-by of the *amchi*. This may do good if only it does not go septic; at any rate it is a strong counter-irritant. Some powder is then given, and the patient informed exactly how to take it, whether with hot, cold or lukewarm water. Food, too, has a most important bearing on the complaint, for, whilst the meat of a white sheep will do nothing but good, that of the black would aggravate the symptoms. As this patient has no fever, he may let himself go to sleep, but if a man has a temperature to let himself drift into such an unconscious state would certainly be fatal. Cupping, the raising of blisters, and venesection are other methods of curing all sorts of complaints.

Next to the Lama the *Onpo* or Horologist is perhaps the most important individual, for if you wish to plough your field, to call in the lamas for the reading of holy books, or desire to choose the best day on which to marry, in fact for the decision of all the important affairs of life, you must get him to settle the auspicious day. There is little to distinguish the *onpo* outwardly, but on official occasions he may dress like a lama, even to the wearing of a priestly cap, but his pigtail will distinguish him from the ecclesiastic. On his back he carries his bundle of books, and the Tibetan almanac. Puntzog, who is thirty years of age, visits the horologist, for he desires to attend the festival at Hemis, but he wants to leave Leh on the best day possible. Hemis occurs in the

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

and women, both Buddhists and Mohammedan, the latter revealing the fact by wearing turban or red fez, and their names often indicating that they were formerly Buddhists, who had been converted to the faith of the prophet ; this is done by adding the word " Sheik " to their new Mohammedan names. Then there are Baltis, ill-clad looking creatures with their meagre black skull-caps from under which appear long, curly, but unkempt-looking, locks. How different from the two or three well-dressed, distinguished-looking Yarkandis, who sit next to them, stalwart men from Chinese Turkestan. Their faces are almost as white as that of the European, with shortly-cropped black hair and black beards, and they wear nice warm wadded garments cut somewhat like a frock-coat with very long sleeves, but of less sombre colours, sometimes a silky glossy cloth of black or even nice blue. To brighten this a large gay coloured embroidered square scarf is worn, folded triangularly with the apex downwards in the middle of the waist behind. On their heads are green or other coloured caps, lined with fur and turned up round the edge, or white pugarees. Occasionally these gentlemen bring their wives with them. Being Mohammedan they may not show their faces to strange men, and they therefore cover them with a voluminous head-dress, with network squares let in over their eyes through which they can look. Then there are some Kashmiris, men with beautifully regular features, strongly reminding one of pictures of good-looking Jews and of stories of the lost ten tribes of Israel. Other down-country races, too, may be represented, such as the Punjabi, or perhaps a Sikh, with the fringe of his black beard neatly plaited, and often the proud Pathan or Afridi appears. That wild ferocious-looking fellow with long, untidy, straggling hair is, of course, one of the upland nomads, whilst the well-dressed man who is sitting on one of our two stools is a merchant priest from the closed land of Tibet. Now shall we stand at the doctor's side, and listen with him to some of the complaints of these patients.

797 563 563 757 164

146 Occidental Treatment for Oriental Maladies

757 164 A very old and dirty-looking beggar-man enters, and calmly addresses the Doctor as follows, "Well, Little Brother, can you give me some medicine?" "Yes, certainly, Grandfather," replies the very professional Doctor, for in Ladak we are all related. Then comes a sedate, elderly lady, who tells us she is called "Deskyid," a name as pretty as its meaning, which is beautiful-happy. "And what is your trouble, A-che (Big Sister) Deskyid?" the Doctor inquires. Poor Deskyid has a very troublesome disease, for she feels as if the back of her leg had moved round to the front! The patient next to consult the Doctor is even in worse plight, for her arm has gone quite *hangdang*, which literally means mad. The Doctor knows of no medicine that is able to cure these troubles, but paints both offending members with Iodine, in the hope that its colour at any rate will help the leg itself to distinguish back from front, and bring the erring arm to its 754 senses. Then comes a lama, who asks whether we can supply him with a little human flesh. We had never regarded ourselves as a shop for this commodity, and on inquiry are informed that should one wish to obtain the powers of witchcraft, or sprinkle any offering with a very potent potion, it is necessary to get a concoction consisting of various kinds of flesh, including human flesh, milk, blood and other ingredients. This should be drunk by the devotee, who will then receive 175 mystic powers. This is, of course, a relic of the old canni- 771 balism and human sacrifice which preceded the arrival of Buddhism, and is still reflected in a common oath constantly heard in the roads—*Amai Sha*, which means "by my mother's flesh." Our friend had to obtain these occult powers without 757 our help! Priests also have their troubles. Said one to the 876 Doctor, and he a Holy Incarnation, too, "Can you give me some medicine which will turn my skin white like your own." One can only hope he will behave so well in this incarnation that he may be re-incarnated in a white race next, although it is whispered that such a degradation only happens on account of former sins.

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

of former sins. Another patient—this time a Royal one be it noticed—asks for some medicine which will stop his beard from growing. Could such be produced much trouble might be saved for him as well as many others. The next comer informs us that he himself is not a patient, but that away at his home his little brother is suffering from headache, and is quite aggrieved that treatment without examination is refused. Now a Balti comes, who says he is perfectly well at present, but that he is quite certain one day he will have a pain in his digestive organs, and he would like to be prepared against that day. Another old gentleman has returned for more medicine, although only yesterday he had been provided for three days, and on being reproached for having disobeyed instructions, advances the perfectly reasonable argument that, if one dose of medicine is going to do him good, ten doses will multiply the good effect tenfold.

Having seen all our out-patients and attended to their treatment, we adjourn to the operating-room where a cataract is to be removed. To-day our patient is of noble rank, being the mother of the chief Rajah of Ladak. Some days previously the old King had asked us to operate on his maternal relative, and we actually fixed the date, but, alas! he found on consulting his horologist and books, that we had chosen a most inauspicious day and begged the Doctor to change it, which he did. There lies the old lady on the operating-table, her refined features and well-kept hands testifying to her good breeding. We scrub our hands so thoroughly that the onlookers, among whom is the King, no doubt feel this is part of a religious performance preceding the operation. Having arranged the sterile towels, we are just about to start, when the exalted son begins walking up and down the room rapidly, saying his *Om Mani pa dme hungs*, the while turning the beads of his rosary. This is hardly conducive to the stillness an English surgeon would desire when performing a cataract extraction. The obstructing lens is removed, how-

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

757 565 ever, and great is the joy when the old lady finds she can again see, but she can hardly be surprised, when the day was so auspicious, and her son's prayers had been so vigorously performed. She was then sent back to her ward, which had been converted into a fairly regal apartment by means of Tibetan rugs and cushions and other paraphernalia brought from her castle. Fourteen days later she was told she could now return to her home, but she told her royal Physician that she was so enjoying her holiday that she would like to stay in our Hospital for another fortnight. Her royal wish was regarded as a command, and we prolonged her holiday, but before she finally left, she honoured us by calling at our house with her retinue, and to testify their gratitude for restored sight she and her son presented us with gifts.

797 But now let us go to the wards. The word "ward" conjures up pictures of long rooms, with spick-and-span white painted walls, and floors so polished and smooth, that one feels skates would be the safest foot-gear; tables with plate-glass tops and beautiful flowers, and rows of white, quilted beds. But in the frontier hospitals of India, wards 758 are not quite of this nature. When a Ladaki goes to Hospital, 593 he does not go alone, but likes to take as many of his family with him as he can, and our wards are made to accommodate them all. This has the further advantage that the family's cooking fire, which is often made on the floor in the centre of the "ward" helps to heat the room. The whole building is made of mud bricks, some floors are boarded, others are not.

758 We enter the first ward. Here is a man on whom we operated 301 to remove large tumours, depending from the lobes of his 164 ears, which had formed because he would persist in wearing ear-rings. We warn him that if he does not restrain his vanity in future, he will get further growths, but he replies that it is a religious duty for him to wear the ornaments, and he had actually come to have his keloids removed in order to be 758 able to wear ear ornaments again. In the next ward we find an

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

old lady who has had her cataract removed. She is lying on the floor by the side of a nice spring bedstead, on which she had been placed yesterday after her operation. In reply to our query why she did not stay quietly on her bed, she says she felt so giddy sleeping so high up in the world, and more safe on the floor. True, she cannot fall out of bed now. In Ward 3 is a Yarkandi whose leg we have had to amputate to save his life. He has come that difficult journey from Yarkand, over the Karakorum range of the Himalayas and the Dipsang plateau, and been overtaken by frost-bite. Very likely at the end of the hard day's march over the snow he was so exhausted that he fell asleep without troubling to take off his heavy boots, and the circulation had no chance to re-establish itself in the severe cold. In the next ward we find that a string has been stretched across from one wall to the other, over which strips of meat have been hung, and we are told that the family are drying their next winter's supply. One can just imagine the happy expression on the face of an English Surgeon, who on entering his ward found such activities being pursued. In the next ward we can see nothing, for it is filled with acrid smoke which so hurts our eyes that we beat a rapid retreat. Dinner is being cooked! But we must not linger longer with our in-patients, for we would like to take the reader with us on a medical tour.

When we visited Kyelang, it will be remembered that we made a detour to a place called Lingshed. Messengers came to beg us to go to this village in 1916, because it was so central, and they promised that blind folk from the whole surrounding district would gather there; the further inducement was held out that throughout the trip the question of supplies would be made easy for us. So one evening we found ourselves in our tents in Lingshed with about thirty blind folk sitting round. We examined their eyes, deciding that some were operable, others not. The latter were informed as kindly as possible that no operation on earth could

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. Tibetans AJ4

cure them of their blindness, but our solicitude seemed unnecessary, for they remained quite cheerful, merely saying "*Lanchaks*,"—that is "we are atoning for our sins in a former incarnation." No doubt those successfully operated upon are getting the reward for former good deeds, and for the successful operation it is quite unnecessary to thank the Surgeon when virtue is being rewarded. The next question is, where are we to operate? Under the open sky the sun is too grilling and brilliant, and the tent is too small. We have detected a verandah which would make a most suitable temporary operating-theatre, in fact it is practically the only available spot, but, on suggesting this, are informed that this is a temple verandah and belongs to a very great and holy man. "There you cannot operate" we are told emphatically, and reply that the reason adduced makes the place more desirable than ever, and we must operate there or nowhere. This point is gained, or partly so. We might operate on the men there, but not the women, for they must not enter such a holy place. Alas! the Doctor Sahib must have had a strange upbringing, for he informs these Lingshed men that in the peculiar country whence he comes, the dictum is "Ladies first," and only when these are done can the Lords of Creation be tackled. That settles this point, but not even yet are all our difficulties overcome, for a very old lama finds his way to the Doctor, who having examined him, finds the eyes quite operable. He is, however, begged not to give the old fellow his sight, for he is so poor that he has not sufficient food to sustain him while the wounds heal, nor a helper to care for him during his time in bed. The former objection is easily overcome for we begin to charge in kind for the medicines we dispense, and soon the old fellow finds himself quite well off in flour, rice, and dried apricots, and a nurse is also provided for him. Preliminary arrangements having been completed, we make our way one fine morning to our temporary operating-theatre in the verandah of the temple. An old bedstead which cannot boast a spring-mattress, having only a rough

13: Heber and Heber D-3 (1914-25) 1926 AJ4 W. ...betans AJ4

network of rope, serves as operating-table. A small box does duty as instrument table, whilst an X travelling wash-stand must serve for the Surgeon's washing of hands and that, too, of his assistant. The first patient is brought in, a woman who prostrates herself before the door of the temple. One of the villagers has been impressed as an extra assistant, and is now instructed thoroughly to wash the lady's face with soap and water. She is then laid on the dirty bedstead, and her dirty clothes are covered first by a sheet of clean mackintosh, and then by towels which have been sterilized in Carbolic Acid, and her not overclean hair is likewise covered. Cocaine is then instilled into both eyes, the Surgeon and his assistant wash their hands, then kneeling at their very low operating-table proceed to extract the cataracts. This done, fingers are held up for the patient to count, and the onlookers reveal their interest and joy by ejaculations of "*wah!*," or "*tong dug*" —"she sees." Eyes are bandaged, and the next patient tackled. That day we did twenty-two cataract operations, and afterwards were inclined to boast about it till we met another Missionary Doctor,—Holland of Quetta,—who told us that he had done over ninety in one day. And the results? Of our twenty-two, eighteen received good sight, two were partially successful, whilst two were failures. Considering the dirty patients and dirtier surroundings, we felt the results quite justified the trip. We stayed a few days longer till it was safe to leave those on whom we had operated, and then began our return journey, thinking ruefully of how the deputation from Lingshed had promised to furnish us with supplies on the road, and had faithfully done so until the operations were over and there was little more to be got out of us. On the way home we were left to fend for ourselves, and our poor ponies had occasionally to go hungry. Ingratitude, and not gratitude, is one of the prominent characteristics of the Ladaki, for does not a good action bring its own reward, and the Doctor will have reaped much merit from his medical tour.

24:Peter E-5 (1938)1963 AJ4 West Tibetans AJ4
Lahul

shrine of the local deity (*yül-lha*, (*Yul-lha*)), where she offers up some *chang*. His father and three of his relatives have, in the meantime, carried a large pile of *tsampa* up to the same place, and they, too, present it to the god as an offering. A lama will then draw the figure of a stag in the dust in front of the shrine, and will shoot at it with an arrow from a bow he has brought. This is supposed to kill all evil which might attack the child.

Next, when a boy is between four and five, his hair is ritually cut in a ceremony which goes by the name of *Raldag* (probably *Ral-ltag*, "long hair-neck hair"). After three days of feasting in which the whole family, their relatives and their friends take part, the child's maternal uncle (*azhang* (*a-zhang*)) shears all his nephew's hair off and takes the locks to each person present in turn. In exchange for looking at the hair, they each give a small piece of money to the parents as a lucky offering.

The first doctor whom I saw was called Sönam Tashi (*bSod-Nams-bKra-shis*) and he was a lama from a village called Bardgi. He informed me that there were quite a lot of nervous ailments in Lahul, the principal ones being epilepsy and hysteria. The first of these two appeared when the person was about fifteen years old, and he attributed the cause to alcohol. He thought, too, that it might have some connection with the high incidence of venereal diseases to be found in the valley, infections which he said had been introduced from Kulu. Hysteria often brought with it symptoms of frigidity in women and of impotence in men, and he had a number of patients suffering in this way. As a cure for epilepsy, he advocated beating with hot juniper branches. Hysteria was better cured, he thought, by administering pills made of paper upon which prayers had been written.

There was a Government Hospital at Kyelang, and on the 28th June 1938 I went there to interview its director, Dr. Bhagwan Singh. I asked him about Tibetan medicine, and who the local doctors were in Lahul. He told me that there were quite a number of them and that they went by the name of *amchi* (*Am-ch'hi* or *Aem-ch'hi*). The best among them was Katug (*Ka-bTug*) of Chelling, but there were also Tsering Norbu (*Ts'he-ring Nor-bu*) of Billing, Dön-drup (*Don-Grub*) of Kardang, and the old uncle of the Wazir, Thakur Mangal Chand, *amchi* of Kyelang, whose Tibetan name was Tashi Dawa (*bKra-shis Zla-ba*). According to Dr. Bhagwan Singh, ayurvedic medicine (although I think this was only his way of naming Tibetan medicine as distinct from the Western system) was practised, but extra to this, considerable use was made of Tibetan medicinal herbs.

24:Peter E-5 (1938)1963 AJ4 West Tibetans AJ4
Lahul

He told me that he treated the following diseases by Western methods: venereal (by far the greatest incidence), skin trouble, round worm, epilepsy, hysteria (mostly in women, especially unmarried ones), paraplegia and hemiplegia (due to syphilis), some cases of leprosy, eye inflammations due to various causes, ear infections, tuberculosis (which was on the increase due to winter promiscuity), but no cancer (at least observed). I discussed polyandry with him in conjunction with his remarks about the hysteria of unmarried women (who were numerous in Lahul because of polyandry, he said) and the promiscuity of the winter dwelling in one room, and he told me that he had had one case of suicide; it was a *no* (younger brother) he told me, who had put an end to his life because he was jealous of his brothers sharing the wife with him. He was thirty seven years old at the time, and there was no doubt that this jealousy was the actual reason for his fatal nervous affliction.

Since Thakur Mangal Chand was easily available in Kyelang, I next went to see him, on the 5th July 1938. An elderly man of over sixty, he had for a long time been Lahul's Forest Officer, but in his old age had turned to medicine and had become quite proficient in it and well known under his Tibetan name of Tashi Dawa. He told me that Tibetan medicine was ayurvedic to some extent, since it was the result of a translation of the Indian texts by Tibetan doctors acting on the orders of King Srong Tsän Gampo (*Srong-bTsan-sGam-po*) in the 7th century A.D. Asked if there was much nervous disease in Lahul, he replied that there was little. Light cases were treated by lama Sönam Tashi whom I had interviewed earlier on, while serious ones came to him. There were relatively more women ill in this manner than men, and hysteria was quite prevalent among them. He could, however, quote some cases of men, too.

Thus there was the case of a lama in Kardang, married polyandrously to a single, common wife with his two elder brothers. As long as they were alive, he was very jealous of them, as he wanted the woman all to himself. He developed a nervous paralysis of the leg which lasted as long as his brothers lived. They died, however, one after the other, so that in the end he was left with the wife alone. From that day onwards, he was cured; his paralysis disappeared and he was able to walk again.

He knew also of another case of an elder brother in the upper part of the Bhaga valley who was hysterically nervous, as he put it, because he could not stand the idea of sharing his wife with his younger brothers. Apparently, everybody in Lahul was not capable of living in polyandry and adapting himself to this form of matrimony.

24:Peter E-5 (1938)1963 AJ4 West Tibetans AJ4
Lahul

There were a few instances of frigidity and impotence, Tashi Dawa said. He treated these with aphrodisiacs and they gave him no more trouble after that. The medicine used in such cases was the juice of the Japutsitsi plant, popularly called Gege of Wangla, (I was not able to identify this plant botanically and therefore cannot give its Latin name).

I met Thakur Mangal Chand, alias Tashi Dawa again, upon other occasions, and was treated to long discourses on Tibetan medicine. The data, which I noted at the time appears to be irrelevant to the question of polyandry, however, apart from the interesting cases mentioned above, so I shall abstain from giving a fuller account of it here. It is nevertheless perhaps worth mentioning that I heard from the *amchi* that abortion was practised on unmarried women and even on married ones in certain circumstances (when it was too apparent that conception was not due to relations with a husband). To bring about the required results, he made use of a mixture of horse-blood, red soot called *tsot*(?), musk and bee's wax.

On another occasion, I was interested to hear from a *gelong* (*dGe-sLong*), or high ordained lamaist priest, called Dön-drup, whom I met on the 27th of June, 1938, in the village of Billing near Kyelang, of the way in which sex plays a role in reincarnation. When a soul is searching for a womb in which to be conceived for rebirth, should the woman eventually chosen love her husband, it is sure that the new earthly form taken will be female. If, on the contrary, the woman does not love her husband, a boy will be born.

This statement was strangely reminiscent of *The Tibetan Book of the Dead* by W. Y. Evans-Wentz (Third Edition, 1957), in which it is said that if the deceased, who is to be reborn, is about become a male, an intense feeling of aversion for the father and of attraction for the mother comes upon him, or vice-versa as regards birth as a female.

B. POLYANDRY IN RUPCHU *(RUP-CH'HU)* AND LADAK *(LA-DWAGS)*

1. RUPCHU

On the way between Lahul and the Rupchu plateau, I encountered many people on the road, mainly in the evening when we reached camping places. These people varied between Tibetan nomads moving south with goods to sell, Lahulis visiting Kulu or returning from there, and Tibetan pilgrims on their way to and from the holy Buddhist places in The Indian plains.